

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Jan 9-1</i>		<i>03-21-01</i>
O.I.P.E. CLASSIFIER	<i>JA</i>	<i>720 11</i>	<i>05-11-01</i>
FORMALITY REVIEW			<i>05-15-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4/16/02
2	✓	✓	4/16/02
3	✓	✓	4/16/02
4	✓	✓	4/16/02
5	✓	✓	4/16/02
6	✓	✓	4/16/02
7	✓	✓	4/16/02
8	✓	✓	4/16/02
9	✓	✓	4/16/02
10	✓	✓	4/16/02
11	✓	✓	4/16/02
12	✓	✓	4/16/02
13	✓	✓	4/16/02
14	✓	✓	4/16/02
15	✓	✓	4/16/02
16	✓	✓	4/16/02
17	✓	✓	4/16/02
18	✓	✓	4/16/02
19	✓	✓	4/16/02
20	✓	✓	4/16/02
21	✓	✓	4/16/02
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26	✓	✓	4/16/02
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28	✓	✓	4/16/02
29	✓	✓	4/16/02
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43	✓	✓	4/16/02
44	✓	✓	4/16/02
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46	✓	✓	4/16/02
47	✓	✓	4/16/02
48	✓	✓	4/16/02
49	✓	✓	4/16/02
50	✓	✓	4/16/02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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BEST AVAILABLE COPY

*020*  
*5/17/01*